



DEPARTMENT OF THE NAVY  
NAVAL SUPPLY SYSTEMS COMMAND  
WASHINGTON, D.C. 20376-5000

NAVSUPINST 12351.3B  
SUP 03H  
2 APR 92

NAVSUP INSTRUCTION 12351.3B

Subj: AUTHORITY TO APPROVE CIVILIAN REDUCTION-IN-FORCE (RIF)  
ACTIONS

Ref: (a) SECNAVINST 12351.5D

Encl: (1) RIF Fact and Justification Sheet

1. Purpose. To promulgate Naval Supply Systems Command (NAVSUP) policy on and procedures for approving civilian reduction-in-force (RIF), transfer of function and furlough actions.

2. Cancellation. NAVSUPINST 12351.3A

3. Background. Reference (a) sets forth Department of Navy (DON) guidance applicable to all RIF, transfer of function and furlough approvals. The Assistant Secretary of the Navy (Manpower and Reserve Affairs) (ASN (M&RA)) was delegated approval authority for RIFs, transfer of function or furlough (for more than 30 consecutive days or 22 days if done on a noncontinuous basis) involving 50 or more civilian employees or when these actions would generate significant Congressional interest. Reference (a) has delegated approval for actions of a lesser scope than above to Echelon 2 Commanders.

4. Policy. NAVSUP will adhere to DON policy as stated in reference (a).

5. Authority. Commander, Naval Supply Systems Command will be the approval authority for RIF, transfer of function and furlough (any length of time) requests involving less than 50 civilian employees.

6. Action

a. Activities requesting RIF, transfer of function or furlough (any length of time) authority for less than 50 civilian employees will submit justification as outlined in enclosure (1) to NAVSUP (SUP 03H).

b. Activities requesting RIF, transfer of function or furlough (more than 30 consecutive days or 22 days if done on a noncontinuous basis) authority for more than 50 civilian

NAVSUPINST 12351.3B  
2 APR 92

employees, will submit justification as required in reference  
(a) to ASN (M&RA) via NAVSUP (SUP 03H).



R. W. THORNETT  
Deputy Commander for  
Corporate Management

Distribution:

SNDL: FKM (Shore Activities under the Command of the Commander,  
Naval Supply Systems Command)

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NAVSUP SUP 323A (15 Copies); 03H (4 copies), X(32) (NAVSUP  
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NAVSUPINST 12351.3B  
2 APR 92

SECNAVINST 12351.5D  
18 JUN 91

FACT AND JUSTIFICATION SHEET  
FOR ACTIONS REQUIRING ASN(M&RA) APPROVAL

1. Fact Sheet on (name and location of the activity):
2. Background and mission:
  - a. State approved activity mission. Include any significant information having a bearing on the request to include summary information on previous reductions-in-force, furloughs, or transfers of functions conducted during the current fiscal year.
  - b. Number of permanent onboard employees as of (date):
  - c. Number of temporary onboard employees as of (use same date as in 2b).
  - d. Number of vacancies authorized for recruitment as of (use same date as in 2b).
3. Approval of this action will result in (check appropriate block):
  - a. Transfer of function to (state location)
  - b. Reduction in force
  - c. Furlough for (work/calendar) days
4. Proposed effective date of the action:
5. Reason for the action:
6. Funding impact (anticipated savings vs cost of proposed action):
  - a. Savings:
  - b. Costs: (e.g. severance pay, unemployment, relocation, etc.)
7. Impact of the action on the civilian workforce:
  - a. Number of anticipated RIF separations:
  - b. Number of anticipated furloughs:
  - c. Number of anticipated transfers with function:
  - d. Estimated number of temporary employee terminations:

Enclosure (1)

NAVSUPINST 12351.3B  
2 APR 92

SECNAVINST 12351.5D  
18 JUN 91

- e. Estimated number of on-call employees released:
- f. Anticipated attrition for each of the following categories:

(1) Estimated number of retirees:

(2) Estimated number of employees to transfer to other activities within the commuting area (in a transfer of function, do not include those employees who you anticipate will transfer with their function):

(3) Estimated number of employees to transfer to other activities outside of the commuting area (in a transfer of function, do not include those employees who you anticipate will transfer with their function):

(4) Other:

8. Impact of the action on military personnel:

- a. Number of officer end-strength reductions:
- b. Number of enlisted end-strength reductions:

9. Impact of the action on civilian EEO:

a. Total number permanent onboard (provide by the following categories):

| Caucasian | Black     | Hispanic  | Other     | *Handicapped |
|-----------|-----------|-----------|-----------|--------------|
| **M/F     | M/F       | M/F       | M/F       | M/F          |
| ____/____ | ____/____ | ____/____ | ____/____ | ____/____    |

\* If minority and handicapped, report in both categories

\*\* M: Male F: Female

b. Estimated total number of permanent on board adversely affected by RIF (provide by categories listed in 9a):

| Caucasian | Black     | Hispanic  | Other     | *Handicapped |
|-----------|-----------|-----------|-----------|--------------|
| M/F       | M/F       | M/F       | M/F       | M/F          |
| ____/____ | ____/____ | ____/____ | ____/____ | ____/____    |

c. Estimated total number of permanent on board affected by furlough or transfer of function (provide by categories listed in 9a):

NAVSUPINST 12351.3B  
2 APR 92

SECNAVINST 12351.5D  
18 JUN 91

| Caucasian | Black | Hispanic | other | *Handicapped |
|-----------|-------|----------|-------|--------------|
| M/F       | M/F   | M/F      | M/F   | M/F          |
| /         | /     | /        | /     | /            |

10. Economic impact on the activity:

a. Number of RIF actions taken prior to this request this fiscal year:

(1) Number of involuntary separations to date this fiscal year:

(2) Number of employees adversely affected by RIF to date this fiscal year (do not include involuntary separations):

b. Number of transfer of function actions taken prior to this request this fiscal year (provide information in following format; if more than one transfer of function, list each separately):

Function transferred:

Date transferred:

Location where transferred:

Number of employees affected:

c. Number of furlough actions taken prior to this request this fiscal year (provide information in following format):

Dates of furlough (from-through):

Number of employees affected:

11. Provide the following when proposed action results from a Commercial Activities (CA) study:

a. Number of permanent onboard employees under CA study:

b. Number of temporary onboard employees under CA study:

c. Number of vacant positions under CA study:

d. Statement of the impact on the military mission of the activity (this statement should be consistent with the CA Decision Summary Message):

12. Provide the following economic impact on the community if more than 75 employees will be affected by a conversion to a contract that resulted from a CA study:

NAVSUPINST 12351.3B  
2 APR 92

SECNAVINST 12351.5D  
18 JUN 91

a. Current status for entire community:

Location:  
Population:  
Employment:  
Business volume:  
Tax base:  
Personal income:

b. Anticipated impact of proposed actions:

Location:  
Population:  
Employment:  
Business volume:  
Tax base:  
Personal income:

13. Assistance to affected civilians (briefly describe efforts):

14. Labor organizations affected (specify the organization; if none, so state):

15. Name and telephone number (commercial and autovon) of individual at this activity who can provide detailed additional information: